

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

**NORTHERN DISTRICT OF GEORGIA**

Case number (if known): \_\_\_\_\_ Chapter you are filing under:

- ☐ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☒ Chapter 13

☐ Check if this is an amended filing

Official Form 101

**Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
<b>1. Your full name</b> Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	<b>Duane</b> First Name  <b>Elliott</b> Middle Name  <b>Alexander</b> Last Name  Suffix (Sr., Jr., II, III)	  First Name  Middle Name  Last Name  Suffix (Sr., Jr., II, III)
<b>2. All other names you have used in the last 8 years</b>  Include your married or maiden names.	<b>Duane</b> First Name  Middle Name <b>Alexander</b> Last Name	  First Name  Middle Name  Last Name
<b>3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)</b>	xxx - xx - 0 2 0 0 OR 9xx - xx -	xxx - xx - OR 9xx - xx -
<b>4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years</b>  Include trade names and doing business as names	<input checked="" type="checkbox"/> I have not used any business names or EINs.  Business name  Business name  Business name	<input type="checkbox"/> I have not used any business names or EINs.  Business name  Business name  Business name

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**About Debtor 1:**

EIN \_\_\_\_\_  
EIN \_\_\_\_\_

**About Debtor 2 (Spouse Only in a Joint Case):**

EIN \_\_\_\_\_  
EIN \_\_\_\_\_

**5. Where you live**

**515 Little Creek Road SE**

Number Street

Number Street

**Lawrenceville GA 30045**

City State ZIP Code

**Gwinnett**

County

City State ZIP Code

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

*Check one:*

- ☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

*Check one:*

- ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under**

*Check one:* (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- ☐ Chapter 7
- ☐ Chapter 11
- ☐ Chapter 12
- ☒ Chapter 13

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

8. How you will pay the fee

- ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

- ☐ No  
☒ Yes.

District **NDGA** When **07/31/2012** Case number **12-68833**  
MM / DD / YYYY

District **NDGA** When **11/05/2014** Case number **14-72022**  
MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

- ☒ No  
☐ Yes.

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
MM / DD / YYYY if known

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
MM / DD / YYYY if known

11. Do you rent your residence?

- ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

- ☒ No. Go to Part 4.  
☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

\_\_\_\_\_  
Name of business, if any

\_\_\_\_\_  
Number Street

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

\_\_\_\_\_  
City State ZIP Code

*Check the appropriate box to describe your business:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

- ☒ No. I am not filing under Chapter 11.  
☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  
☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

**Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

- ☒ No  
☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

Where is the property?

\_\_\_\_\_  
Number Street

\_\_\_\_\_  
City State ZIP Code

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

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- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?
- 16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☐ No. Go to line 16b.  
☒ Yes. Go to line 17.
- 16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.  
☐ Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer or business debts.
- 
17. Are you filing under Chapter 7?
- ☒ No. I am not filing under Chapter 7. Go to line 18.
- ☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☐ No  
☐ Yes
18. How many creditors do you estimate that you owe?
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> 1-49               | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99              | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input checked="" type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999            |  |  |
19. How much do you estimate your assets to be worth?
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                   | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000             | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million          | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |
20. How much do you estimate your liabilities to be?
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                   | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000             | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million          | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X /s/ Duane Elliott Alexander** \_\_\_\_\_  
Duane Elliott Alexander, Debtor 1

Executed on **03/05/2017** \_\_\_\_\_  
MM / DD / YYYY

**X** \_\_\_\_\_  
Signature of Debtor 2

Executed on \_\_\_\_\_  
MM / DD / YYYY

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X **/s/ Matthew T. Berry** Date **03/05/2017**  
Signature of Attorney for Debtor MM / DD / YYYY

**Matthew T. Berry**  
Printed name

**Berry & Associates**  
Firm Name

**2751 Buford Hwy**  
Number Street

**Suite 600**

**Atlanta** **GA** **30324**  
City State ZIP Code

Contact phone **(404) 235-3300** Email address **mberry@mattberry.com**

**055663**  
Bar number State



**Fill in this information to identify your case and this filing:**

Debtor 1 Duane Elliott Alexander  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number  
(if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 106A/B

**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**

**1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

- ☐ No. Go to Part 2.  
☒ Yes. Where is the property?

1.1.

**SFDD**

**515 Little Creek Road SE,  
Lawrenceville, Georgia**

County \_\_\_\_\_

**What is the property?**

Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☒ Other **SFDD**

**Who has an interest in the property?**

Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**\$129,200.00**

**Current value of the portion you own?**

**\$129,200.00**

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

**Ownership Subject to Lien**

☐ Check if this is community property (see instructions)

**2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....**

**\$129,200.00**

**Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No  
☒ Yes

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

3.1. **Who has an interest in the property?** Do not deduct secured claims or exemptions. Put the  
 Make: **Ford** Check one. amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.  
 Model: **Fusion** ☒ Debtor 1 only **Current value of the** **Current value of the**  
 Year: **2014** ☐ Debtor 2 only **entire property?** **portion you own?**  
 Approximate mileage: \_\_\_\_\_ ☐ Debtor 1 and Debtor 2 only **\$8,625.00** **\$8,625.00**  
 Other information: \_\_\_\_\_ ☐ At least one of the debtors and another  
**2014 Ford Fusion** ☐ **Check if this is community property**  
 (see instructions)

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**  
*Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories*

☒ No  
☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any  
 entries for pages you have attached for Part 2. Write that number here..... →

**\$8,625.00**

### Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

**Current value of the  
 portion you own?**  
 Do not deduct secured  
 claims or exemptions.

6. **Household goods and furnishings**

*Examples: Major appliances, furniture, linens, china, kitchenware*

☐ No  
☒ Yes. Describe..... **HHG**

**\$1,500.00**

7. **Electronics**

*Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners;  
 music collections; electronic devices including cell phones, cameras, media players, games*

☒ No  
☐ Yes. Describe.....

8. **Collectibles of value**

*Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;  
 stamp, coin, or baseball card collections; other collections, memorabilia, collectibles*

☒ No  
☐ Yes. Describe.....

9. **Equipment for sports and hobbies**

*Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;  
 canoes and kayaks; carpentry tools; musical instruments*

☒ No  
☐ Yes. Describe.....

10. **Firearms**

*Examples: Pistols, rifles, shotguns, ammunition, and related equipment*

☒ No  
☐ Yes. Describe.....

11. **Clothes**

*Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories*

☐ No  
☒ Yes. Describe..... **Clothing**

**\$400.00**

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- ☒ No  
☐ Yes. Describe.....

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

- ☒ No  
☐ Yes. Describe.....

**14. Any other personal and household items you did not already list, including any health aids you did not list**

- ☒ No  
☐ Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....**

**\$1,900.00**

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☒ No  
☐ Yes..... Cash: .....

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- ☐ No  
☒ Yes..... Institution name:

17.1. Checking account:	<b>Bank of America Checking</b>	<b>\$700.00</b>
17.2. Savings account:	<b>Bank of America savings account</b>	<b>\$0.00</b>

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

- ☒ No  
☐ Yes..... Institution or issuer name:

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

- ☒ No  
☐ Yes. Give specific information about them..... Name of entity: % of ownership:

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders. *Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

- ☒ No  
☐ Yes. Give specific information about them..... Issuer name:

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☒ No  
☐ Yes. List each account separately. Type of account: Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company  
*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No  
☐ Yes..... Institution name or individual:

**23. Annuities** (A contract for a specific periodic payment of money to you, either for life or for a number of years)

- ☒ No  
☐ Yes..... Issuer name and description:

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No  
☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

- ☒ No  
☐ Yes. Give specific information about them \_\_\_\_\_

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No  
☐ Yes. Give specific information about them \_\_\_\_\_

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No  
☐ Yes. Give specific information about them \_\_\_\_\_

**Money or property owed to you?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

- ☒ No  
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: \$0.00  
 State: \$0.00  
 Local: \$0.00

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No  
☐ Yes. Give specific information

Alimony: \$0.00  
 Maintenance: \$0.00  
 Support: \$0.00  
 Divorce settlement: \$0.00  
 Property settlement: \$0.00

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No  
☐ Yes. Give specific information \_\_\_\_\_

**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No  
☐ Yes. Name the insurance company of each policy and list its value..... Company name: Beneficiary: Surrender or refund value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

- ☒ No  
☐ Yes. Give specific information \_\_\_\_\_

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No  
☐ Yes. Describe each claim..... \_\_\_\_\_

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☒ No  
☐ Yes. Describe each claim..... \_\_\_\_\_

**35. Any financial assets you did not already list**

- ☒ No  
☐ Yes. Give specific information \_\_\_\_\_

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....** →

**\$700.00**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

- ☒ No. Go to Part 6.  
☐ Yes. Go to line 38.

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**

- ☒ No  
☐ Yes. Describe... \_\_\_\_\_

**39. Office equipment, furnishings, and supplies**

*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☒ No  
☐ Yes. Describe... \_\_\_\_\_

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

- ☒ No  
☐ Yes. Describe... \_\_\_\_\_

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**41. Inventory**

- ☒ No  
☐ Yes. Describe... \_\_\_\_\_

**42. Interests in partnerships or joint ventures**

- ☒ No  
☐ Yes. Describe..... Name of entity: \_\_\_\_\_ % of ownership: \_\_\_\_\_

**43. Customer lists, mailing lists, or other compilations**

- ☒ No  
☐ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?  
☐ No  
☐ Yes. Describe..... \_\_\_\_\_

**44. Any business-related property you did not already list**

- ☒ No  
☐ Yes. Give specific information.

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....** →

**\$0.00**

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

**Current value of the  
portion you own?**  
Do not deduct secured  
claims or exemptions.

**47. Farm animals**

*Examples: Livestock, poultry, farm-raised fish*

- ☒ No  
☐ Yes.... \_\_\_\_\_

**48. Crops--either growing or harvested**

- ☒ No  
☐ Yes. Give specific  
information..... \_\_\_\_\_

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☒ No  
☐ Yes.... \_\_\_\_\_

**50. Farm and fishing supplies, chemicals, and feed**

- ☒ No  
☐ Yes.... \_\_\_\_\_

**51. Any farm- and commercial fishing-related property you did not already list**

- ☒ No  
☐ Yes. Give specific  
information..... \_\_\_\_\_

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....** →

**\$0.00**

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No  
☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here..... → **\$0.00**

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2.....	→	<b>\$129,200.00</b>
56. Part 2: Total vehicles, line 5	<b>\$8,625.00</b>	
57. Part 3: Total personal and household items, line 15	<b>\$1,900.00</b>	
58. Part 4: Total financial assets, line 36	<b>\$700.00</b>	
59. Part 5: Total business-related property, line 45	<b>\$0.00</b>	
60. Part 6: Total farm- and fishing-related property, line 52	<b>\$0.00</b>	
61. Part 7: Total other property not listed, line 54	<b>+\$0.00</b>	
62. Total personal property. Add lines 56 through 61.....	<b>\$11,225.00</b>	Copy personal property total → <b>+\$11,225.00</b>
63. Total of all property on Schedule A/B. Add line 55 + line 62.....		<b>\$140,425.00</b>

**Fill in this information to identify your case:**

Debtor 1	<u>Duane</u>	<u>Elliott</u>	<u>Alexander</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF GEORGIA</u>		
Case number (if known)			

☐ Check if this is an amended filing

**Official Form 106C**

**Schedule C: The Property You Claim as Exempt**

**04/16**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption	
Brief description: <b>SFDD</b> <b>515 Little Creek Road SE,</b> <b>Lawrenceville, Georgia</b> Line from <i>Schedule A/B</i> : <u>1.1</u>	<u>\$129,200.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(1)
Brief description: <b>2014 Ford Fusion</b> Line from <i>Schedule A/B</i> : <u>3.1</u>	<u>\$8,625.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(3)

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No  
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
☐ No  
☐ Yes



Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption
Brief description: <b>HHG</b> Line from Schedule A/B: <u>6</u>	<u>\$1,500.00</u>	<input checked="" type="checkbox"/> <u>\$1,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(4)
Brief description: <b>Clothing</b> Line from Schedule A/B: <u>11</u>	<u>\$400.00</u>	<input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(4)
Brief description: <b>Bank of America Checking</b> Line from Schedule A/B: <u>17.1</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(6)
Brief description: <b>Bank of America savings account</b> Line from Schedule A/B: <u>17.2</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(6)

**Fill in this information to identify your case:**

Debtor 1 Duane Elliott Alexander  
First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number  
 (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

**2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
<u>\$4,095.00</u>	<u>\$129,200.00</u>	<u>\$4,095.00</u>

2.1

Describe the property that  
 secures the claim:

**Alcovy Falls Community Association**  
 Creditor's name  
**Georgia Community Management Inc**  
 Number Street  
**PO Box 2750**

SFDD

**Loganville** **GA** **30052**  
 City State ZIP Code

**Who owes the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim relates  
 to a community debt

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Nature of lien.** Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☒ Other (including a right to offset)

HOA

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

\$4,095.00

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

Part 1:	Additional Page After listing any entries on this page, number them sequentially from the previous page.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any

2.2	Describe the property that secures the claim: <b>Georgia Department of Revenue</b> Creditor's name <b>1800 Century Blvd NE, Suite 17200</b> Number Street <b>Bankruptcy Unit</b>  <b>Atlanta GA 30345</b> City State ZIP Code <b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt  Date debt was incurred _____	any unencumbered property	\$948.00	\$948.00	
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As of the date you file, the claim is: Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Nature of lien.** Check all that apply.  
☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☒ Other (including a right to offset)  
**Tax Lien**  
 Last 4 digits of account number \_\_\_\_\_

2.3	Describe the property that secures the claim: <b>US Auto Sales</b> Creditor's name <b>2875 University Pkwy</b> Number Street  <b>Lawrenceville GA 30043</b> City State ZIP Code <b>Who owes the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt  Date debt was incurred _____	2014 Ford Fusion	\$20,000.00	\$8,625.00	\$11,375.00
-----	---	------------------	-------------	------------	-------------

As of the date you file, the claim is: Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Nature of lien.** Check all that apply.  
☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☒ Other (including a right to offset)  
**Title Lien**  
 Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here: \$20,948.00

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

Part 1:	Additional Page After listing any entries on this page, number them sequentially from the previous page.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any

2.4	Describe the property that secures the claim: <b>US Dept of Hud</b> Creditor's name <b>c/o Deval, LLC</b> Number Street <b>1255 Corporate Drive, #300</b>	<b>SFDD</b>	<b>\$9,466.43</b>	<b>\$129,200.00</b>	<b>\$9,466.43</b>
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <b>Second Mortgage</b> <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number _____					

2.5	Describe the property that secures the claim: <b>Wells Fargo Bank, NA</b> Creditor's name <b>One Home Campus</b> Number Street <b>MAC #X2302-04C</b>	<b>SFDD</b>	<b>\$164,423.00</b>	<b>\$129,200.00</b>	<b>\$35,223.00</b>
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <b>First Mortgage</b> <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <b>09/2008</b> Last 4 digits of account number _____ <b>arrears \$70,691.00</b>					

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$173,889.43**

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

**\$198,932.43**

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center; margin-bottom: 10px;">1</div>	<b>Alcovy Falls Homeowner's Association</b>	On which line in Part 1 did you enter the creditor? _____
	Name <b>Georgia Community Management</b>	Last 4 digits of account number _____
	Number Street <b>PO Box 2750</b>	
	<b>Loganville</b> <b>GA</b> <b>30052</b>	
	City State ZIP Code	
<div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center; margin-bottom: 10px;">2</div>	<b>Aldridge Connors, LTD</b>	On which line in Part 1 did you enter the creditor? _____
	Name <b>15 Piedmont Center</b>	Last 4 digits of account number _____
	Number Street <b>3575 Piedmont Road, NE Ste 500</b>	
	<b>Atlanta</b> <b>GA</b> <b>30305</b>	
	City State ZIP Code	

**Fill in this information to identify your case:**

Debtor 1 Duane Elliott Alexander  
First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number  
 (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.  
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1	\$2,500.00	\$2,500.00	\$0.00

**Larina Weatherby**

Priority Creditor's Name

**c/o Gwinnett County DFACS**

Number Street

**446 W. Crogan St**

**Lawrenceville**

City

**GA**

State

**30046**

ZIP Code

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of PRIORITY unsecured claim:

- ☒ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify \_\_\_\_\_

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 1: Your PRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim	Priority amount	Nonpriority amount
<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**2.2**

**Larina Weathersby**

Priority Creditor's Name

**1303 Glenleaf Drive**

Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Norcross**

**GA**

**30092**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of PRIORITY unsecured claim:

- ☒ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.**

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

**Total claim**

**\$915.00**

4.1

**Capital One**

Nonpriority Creditor's Name

**Attn: General Correspondence/Bankruptcy**

Number Street  
**PO Box 30285**

**Salt Lake City UT 84130**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**Last 4 digits of account number** 6 7 6 4

**When was the debt incurred?** 04/2016

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.2

**ECMC**

Nonpriority Creditor's Name

**Lockbox #8682**

Number Street  
**Po Box 16478**

**St. Paul MN 55116**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**Last 4 digits of account number** \_\_\_\_\_

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

**\$18,367.81**



Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3

\$7,605.00

**Ecmc**

Nonpriority Creditor's Name

**Capital One Retail Svcs/Attn: Bankruptcy**

Number Street

**PO Box 30258**

**Salt Lake City**

**UT**

**84130**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0 0 0 3

When was the debt incurred? 12/2011

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

4.4

\$7,524.00

**Ecmc**

Nonpriority Creditor's Name

**Capital One Retail Svcs/Attn: Bankruptcy**

Number Street

**PO Box 30258**

**Salt Lake City**

**UT**

**84130**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0 0 0 2

When was the debt incurred? 12/2011

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

4.5

\$5,779.00

**Ecmc**

Nonpriority Creditor's Name

**Capital One Retail Svcs/Attn: Bankruptcy**

Number Street

**PO Box 30258**

**Salt Lake City**

**UT**

**84130**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0 0 0 4

When was the debt incurred? 12/2011

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.6

**\$3,767.00**

**Ecmc**

Nonpriority Creditor's Name

**Capital One Retail Svcs/Attn: Bankruptcy**

Number Street

**PO Box 30258**

**Salt Lake City**

**UT**

**84130**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0 0 0 1

When was the debt incurred? 12/2011

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

4.7

**\$300.00**

**First Premier**

Nonpriority Creditor's Name

**3820 N. Louise Ave.**

Number Street

**Sioux Falls**

**SD**

**57107-0415**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Credit Card**

4.8

**\$3,536.00**

**Georgia Department of Revenue**

Nonpriority Creditor's Name

**Bankruptcy Unit**

Number Street

**1800 Century Blvd, NE, Ste 9100**

**Atlanta**

**GA**

**30345**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Taxes**

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

**\$424.00**

4.9

**Mid Am B&T Credit Card**

Nonpriority Creditor's Name

**PO Box 68**

Number Street

Last 4 digits of account number **6 0 5 3**

When was the debt incurred? **04/23/2016**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Ralla MO 65402**  
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

**\$303.00**

4.10

**Optimum Outcomes, Inc**

Nonpriority Creditor's Name

**2651 Warrenville Rd Ste 500**

Number Street

**Suite 400**

Last 4 digits of account number **3 7 3 0**

When was the debt incurred? **07/2016**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

**Downers Grove IL 60515**  
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Account**

**\$0.00**

4.11

**Santander**

Nonpriority Creditor's Name

**Po Box 961245**

Number Street

Last 4 digits of account number **1 0 0 0**

When was the debt incurred? **04/17/2006**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Fort Worth TX 76161**  
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Account**

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**Aaron Sales & Lease Ow**

Name

**309 E Paces Ferry**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Lease**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6 7 8 5

**Atlanta**

**GA**

**30303**

City

State

ZIP Code

**ADT Security Systems Inc.**

Name

**Attn: False Alarm/CRD**

Number Street

**10550 Deerwood Park Blvd. Bldg 400**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Jacksonville**

**FL**

**32256**

City

State

ZIP Code

**Amca/American Medical Coll Agency**

Name

**4 West Chester Plaza**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number Q Q Q Q

**Elmsford**

**NY**

**10523**

City

State

ZIP Code

**Aspire**

Name

**Po Box 105555**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9 9 3 8

**Atlanta**

**GA**

**30348**

City

State

ZIP Code

**Aspire**

Name

**Po Box 105555**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9 9 3 8

**Atlanta**

**GA**

**30348**

City

State

ZIP Code

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Asset Acceptance**

Name

**Attn: Bankruptcy Dept**

Number Street

**PO Box 2036**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 3 5 4 2

**Warren**

**MI**

**48090**

City

State

ZIP Code

**Asset Acceptance**

Name

**Attn: Bankruptcy Dept**

Number Street

**PO Box 2036**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 7 3 5 8

**Warren**

**MI**

**48090**

City

State

ZIP Code

**Asset Acceptance LLC**

Name

**Pob 1630**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 7 3 5 8

**Warren**

**MI**

**48090**

City

State

ZIP Code

**Back Bowl I, LLC**

Name

**c/o Weinstein & Riley, PS**

Number Street

**Po Box 3978**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Seattle**

**WA**

**98124**

City

State

ZIP Code

**Calvary Portfolio Services**

Name

**Attention: Bankruptcy Department**

Number Street

**500 Summit Lake Dr. Suite 400**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9 3 5 1

**Valhalla**

**NY**

**10595**

City

State

ZIP Code

**Capital 1 Bank**

Name

**Attn: General Correspondence**

Number Street

**PO Box 30285**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9 6 4 7

**Salt Lake City**

**UT**

**84130**

City

State

ZIP Code

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Capital One Auto Finance**

Name

**3905 N Dallas Pkwy**

Number Street

**Plano**

City

**TX**

State

**75093**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 1 0 0 1

**Capital One, N.A.**

Name

**Capital One Bank (USA) N.A.**

Number Street

**PO Box 30285**

**Salt Lake City**

City

**UT**

State

**84130**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9 6 4 7

**Cavalry Portfolio Service, LLC**

Name

**500 Summit Lake Drive**

Number Street

**Ste 400**

**Valhalla**

City

**NY**

State

**10595**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Chase**

Name

**P.O. Box 15298**

Number Street

**Wilmington**

City

**DE**

State

**19850**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 7 4 1 8

**Chase**

Name

**P.O. Box 15298**

Number Street

**Wilmington**

City

**DE**

State

**19850**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 7 6 8 3

**Chase Bank USA, NA**

Name

**7322 SW Freeway, Ste 1600**

Number Street

**Houston**

City

**TX**

State

**77074-2053**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Chela/Sallie Mae**

Name

**Attn: Claims Department**

Number Street

**PO Box 9500**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Educational**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 0 8 0 1

**Wilkes-Barre**

**PA**

**18773**

City

State

ZIP Code

**Child Support Enforcement/DCSS**

Name

**Gwinnett County Branch**

Number Street

**1000 Hurricane Shoals Road, NE Bldg A-10**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Child Support**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Lawrenceville**

**GA**

**30043-4826**

City

State

ZIP Code

**Choice One Dental Care**

Name

**1930 Buford Mill Drive**

Number Street

**Suite F**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Medical Services**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Buford**

**GA**

**30519**

City

State

ZIP Code

**Citibank Sd, Na**

Name

**Attn: Centralized Bankruptcy**

Number Street

**PO Box 20507**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6 7 0 5

**Kansas City**

**MO**

**64195**

City

State

ZIP Code

**Citibank Usa**

Name

**Citicorp Credit Services/Attn:Centralize**

Number Street

**PO Box 20507**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Charge Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6 2 8 9

**Kansas City**

**MO**

**64195**

City

State

ZIP Code

**Citibank Usa**

Name

**CITICORP CREDIT SERVICES/ATTN: CENTRALI**

Number Street

**PO Box 20363**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Charge Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6 2 8 9

**Kansas City**

**MO**

**64195**

City

State

ZIP Code



Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Citibank/The Home Depot**

Name

**Citicorp Cr Svcs/Centralized Bankruptcy**

Number Street

**PO Box 790040**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Charge Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6 2 8 9

**S Louis**

**MO**

**63129**

City

State

ZIP Code

**Citifinancial**

Name

**605 Munn Road**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 0 6 6 5

**Fort Mill**

**SC**

**29715**

City

State

ZIP Code

**Citifinancial**

Name

**300 Saint Paul PI**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6 4 1 7

**Baltimore**

**MD**

**21202**

City

State

ZIP Code

**Citifinancial**

Name

**300 Saint Paul PI**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 0 6 6 5

**Baltimore**

**MD**

**21202**

City

State

ZIP Code

**Citifinancial**

Name

**PO Box 499**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6 4 1 7

**Hanover**

**MD**

**21076-0499**

City

State

ZIP Code

**Convergent Outsourcing**

Name

**PO Box 9007**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Renton**

**WA**

**98057**

City

State

ZIP Code



Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Credit One Bank**

Name

**PO Box 98873**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 1 6 2 7

**Las Vegas**

**NV**

**89193**

City

State

ZIP Code

**Dept Stores National Bank/Macys**

Name

**c/o NCO Financial Systems, Inc**

Number Street

**Po Box 4275**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Norcross**

**GA**

**30091**

City

State

ZIP Code

**Dsnb Macys**

Name

**Po Box 8218**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Charge Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 2 0 2 0

**Mason**

**OH**

**45040**

City

State

ZIP Code

**Dsnb Macys**

Name

**9111 Duke Blvd**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Charge Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 2 0 2 0

**Mason**

**OH**

**45040**

City

State

ZIP Code

**Ecmc**

Name

**PO Box 64909**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Educational**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 0 0 0 3

**St. Paul**

**MN**

**55164**

City

State

ZIP Code

**Enhanced Recovery Corp**

Name

**Attention: Client Services**

Number Street

**8014 Bayberry Rd**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 8 8 0 5

**Jacksonville**

**FL**

**32256**

City

State

ZIP Code

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Fac/nab**

Name

**Attn: ABK Unit**

Number Street  
**PO Box 198988**

**Nashville**

City

**TN**

State

**37219**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 3 1 9 3

**Family Practice Clinic P.C.**

Name

**696 Grayson Hwy**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Lawrenceville**

City

**GA**

State

**30046**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6 6 8 9

**First Premier Bank**

Name

**601 S Minnesota Ave**

Number Street

**Sioux Falls**

City

**SD**

State

**57104**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6 6 8 9

**First Premier Bank**

Name

**601 S Minnesota Ave**

Number Street

**Sioux Falls**

City

**SD**

State

**57104**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 1 1 3 1

**First Premier Bank**

Name

**3820 N Louise Ave**

Number Street

**Sioux Falls**

City

**SD**

State

**57107**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Credit Card**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 5 9 5 4

**Fst Premier**

Name

**601 S Minneapolis Ave**

Number Street

**Sioux Falls**

City

**SD**

State

**57104**

ZIP Code

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Gemb/walmart**

Name

**Attn: Bankruptcy**

Number Street

**PO Box 103104**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Charge Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 5 4 3 3

**Roswell**

**GA**

**30076**

City

State

ZIP Code

**Gemb/walmart**

Name

**Attn: Bankruptcy**

Number Street

**PO Box 103104**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Charge Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 5 4 3 3

**Roswell**

**GA**

**30076**

City

State

ZIP Code

**Gwinnett County Tax Commissioner**

Name

**PO Box 372**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Taxes**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Lawrenceville**

**GA**

**30046**

City

State

ZIP Code

**Gwinnett Hospital System**

Name

**Po Box 116228**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Medical Services**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Atlanta**

**GA**

**30368-6228**

City

State

ZIP Code

**Gwinnett Medical Center**

Name

**PO Box 116228**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Medical Services**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Atlanta**

**GA**

**30368**

City

State

ZIP Code

**Gwinnett Surgical Associates**

Name

**600 Professional Drive, Ste 250**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Medical Services**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Lawrenceville**

**GA**

**30045**

City

State

ZIP Code

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**HSBC Auto Finance / Santander**

Name

**Santander Consumer USA**

Number Street

**PO Box 961245**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 0 2 3 4

**Fort Worth**

**TX**

**76161**

City

State

ZIP Code

**HSBC Auto Finance / Santander**

Name

**Santander Consumer USA**

Number Street

**PO Box 961245**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 0 2 3 4

**Fort Worth**

**TX**

**76161**

City

State

ZIP Code

**Hsbc Bank**

Name

**Po Box 5253**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Credit Card

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 3 9 8 2

**Carol Stream**

**IL**

**60197**

City

State

ZIP Code

**Hsbc Bank**

Name

**Po Box 5253**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Credit Card

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9 6 8 6

**Carol Stream**

**IL**

**60197**

City

State

ZIP Code

**IC System**

Name

**Attn: Bankruptcy**

Number Street

**444 Highway 96 East; PO Box 64378**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 2 0 0 1

**St. Paul**

**MN**

**55164**

City

State

ZIP Code

**Ic Systems Inc**

Name

**PO Box 64378**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 2 0 0 1

**St. Paul**

**MN**

**55164**

City

State

ZIP Code

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**IC Systems, Inc**

Name

**444 Highway 96 East**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 2 0 0 1

**St Paul**

**MN**

**55127**

City

State

ZIP Code

**Insolve Recovery, LLC**

Name

**c/o Capital Recovery Group, LLC**

Number Street

**Po Box 123203**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Dallas**

**TX**

**75312**

City

State

ZIP Code

**Internal Revenue Service**

Name

**PO Box 7317**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Philadelphia**

**PA**

**19101-7317**

City

State

ZIP Code

**Jefferson Capital**

Name

**16 McLeland Rd**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 5 0 0 3

**Saint Cloud**

**MN**

**56303**

City

State

ZIP Code

**Jefferson Capital**

Name

**16 McLeland Rd**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 3 0 0 3

**Saint Cloud**

**MN**

**56303**

City

State

ZIP Code

**Jefferson Capital Systems, LLC**

Name

**Po Box 953185**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**St. Louis**

**MO**

**63195**

City

State

ZIP Code

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Jefferson Capital Systems, LLC**

Name

**Po Box 953185**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**St. Louis**

**MO**

**63195**

City

State

ZIP Code

**Kroger Check Recovery Center**

Name

**PO Box 30650**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Salt Lake City**

**UT**

**84130-0650**

City

State

ZIP Code

**Lab Corp of America Holdings**

Name

**PO Box 2240**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Medical Services

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Burlington**

**NC**

**27216-2240**

City

State

ZIP Code

**Lvnv Funding Llc**

Name

**Po Box 740281**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 1 6 2 7

**Houston**

**TX**

**77274**

City

State

ZIP Code

**Mabt/contfin**

Name

**121 Continental Dr Ste 1**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Credit Card

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 5 6 2 1

**Newark**

**DE**

**19713**

City

State

ZIP Code

**Med Data Sys**

Name

**2001 19th Ave Suite 312**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 8 4 6 3

**Vero Beach**

**FL**

**32960**

City

State

ZIP Code

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Pawn Mart**

Name

**7471 HWY 85 STE C and D**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Riverdale**

**GA**

**30274**

City

State

ZIP Code

**Portfolio Recovery Associates, LLC**

Name

**Po Box 12914**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Norfolk**

**VA**

**23541**

City

State

ZIP Code

**Sallie Mae**

Name

**Attn: Navient**

Number Street

**PO Box 9500**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Educational

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 0 8 1 0

**Wilkes-Barr**

**PA**

**18873**

City

State

ZIP Code

**Santander Consumer Usa**

Name

**Po Box 961245**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 1 0 0 0

**Ft Worth**

**TX**

**76161**

City

State

ZIP Code

**SDCCBS 01**

Name

**PO Box 1022**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Wixom**

**MI**

**48393-1022**

City

State

ZIP Code

**Sherwin P. Robin**

Name

**PO Box 9541**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Savannah**

**GA**

**31412-9541**

City

State

ZIP Code

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Slm Financial Corp**

Name

**Po Box 9500**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Educational**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 0 7 3 0

**Wilkes Barre**

**PA**

**18773**

City

State

ZIP Code

**Synchrony Bank/Walmart**

Name

**Attn: Bankruptcy**

Number Street

**PO Box 956060**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Charge Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 5 4 3 3

**Orlando**

**FL**

**32896**

City

State

ZIP Code

**The Cash Line**

Name

**2 Pennsway**

Number Street

**Ste #40**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**New Castle**

**DE**

**19720**

City

State

ZIP Code

**Verve**

Name

**PO Box 31292**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Tampa**

**FL**

**33631-3292**

City

State

ZIP Code

**Visa Dept Store National Bank/Macy's**

Name

**Attn: Bankruptcy**

Number Street

**PO Box 8053**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Charge Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 3 1 2 0

**Mason**

**OH**

**45040**

City

State

ZIP Code

**Wells Fargo**

Name

**PO Box 98751**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Account**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Las Vegas**

**NV**

**89193-8751**

City

State

ZIP Code



Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Wells Fargo Hm Mortgag**

Name

**8480 Stagecoach Cir**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 4 3 8 2

**Frederick**

**MD**

**21701**

City

State

ZIP Code

**Wells Fargo Hm Mortgag**

Name

**8480 Stagecoach Cir**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 4 3 8 2

**Frederick**

**MD**

**21701**

City

State

ZIP Code

**Wells Fargo Home Mortgage**

Name

**Po Box 10368**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Des Moines**

**IA**

**50306-0368**

City

State

ZIP Code

**White Hills Cash**

Name

**5781 W. Sunrise Blvd.**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Plantation**

**FL**

**33313**

City

State

ZIP Code

**Zale/Sterling Jewelers**

Name

**Attn.: Bankruptcy**

Number Street

**PO Box 1799**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Charge Account

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6 9 7 8

**Akron**

**OH**

**43309**

City

State

ZIP Code

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
<b>Total claims from Part 1</b>	6a. Domestic support obligations	6a. <u>\$2,500.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6d. <div style="border: 1px solid black; padding: 2px;"><u>\$2,500.00</u></div>

		Total claim
<b>Total claims from Part 2</b>	6f. Student loans	6f. <u>\$43,042.81</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$5,478.00</u>
	6j. Total. Add lines 6f through 6i.	6j. <div style="border: 1px solid black; padding: 2px;"><u>\$48,520.81</u></div>

**Fill in this information to identify your case:**

Debtor 1	<u>Duane</u>	<u>Elliott</u>	<u>Alexander</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF GEORGIA</u>			
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

**Fill in this information to identify your case:**

Debtor 1	<u>Duane</u>	<u>Elliott</u>	<u>Alexander</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF GEORGIA</u>			
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106H

**Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)  
☒ No  
☐ Yes
2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)  
☒ No. Go to line 3.  
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
☐ No  
☐ Yes
3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.**

Column 1: **Your codebtor**

Column 2: **The creditor to whom you owe the debt**

Check all schedules that apply:

**Fill in this information to identify your case:**

Debtor 1	<b>Duane</b>	<b>Elliott</b>	<b>Alexander</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>NORTHERN DISTRICT OF GEORGIA</b>		
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

**Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment**

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**

**Occupation**

**Employer's name**

**Employer's address**

**Debtor 1**

- ☒ Employed  
☐ Not employed

**Technician**

**Thermo Pac**

**1609 Stone Ridge Dr**

Number Street

**Stone Mountain GA 30083**

City

State

Zip Code

**Debtor 2 or non-filing spouse**

- ☐ Employed  
☐ Not employed

Number Street

City

State

Zip Code

How long employed there? **2 months**

**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>2. List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	<b>\$6,596.00</b>	
<b>3. Estimate and list monthly overtime pay.</b>	<b>+\$0.00</b>	
<b>4. Calculate gross income.</b> Add line 2 + line 3.	<b>\$6,596.00</b>	

Debtor 1	<b>Duane</b>	<b>Elliott</b>	<b>Alexander</b>	Case number (if known) _____
	First Name	Middle Name	Last Name	

  

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here ..... → 4.	<b>\$6,596.00</b>	
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. <b>\$1,418.00</b>	
5b. Mandatory contributions for retirement plans	5b. <b>\$0.00</b>	
5c. Voluntary contributions for retirement plans	5c. <b>\$0.00</b>	
5d. Required repayments of retirement fund loans	5d. <b>\$0.00</b>	
5e. Insurance	5e. <b>\$0.00</b>	
5f. Domestic support obligations	5f. <b>\$0.00</b>	
5g. Union dues	5g. <b>\$0.00</b>	
5h. Other deductions. Specify: _____	5h. + <b>\$0.00</b>	
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. <b>\$1,418.00</b>	
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. <b>\$5,178.00</b>	
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. <b>\$0.00</b>	
8b. Interest and dividends	8b. <b>\$0.00</b>	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. <b>\$0.00</b>	
8d. Unemployment compensation	8d. <b>\$0.00</b>	
8e. Social Security	8e. <b>\$0.00</b>	
8f. Other government assistance that you regularly receive  Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. <b>\$0.00</b>	
8g. Pension or retirement income	8g. <b>\$0.00</b>	
8h. Other monthly income. Specify: _____	8h. + <b>\$0.00</b>	
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	<b>\$0.00</b>	
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	<b>\$5,178.00</b>	+ <span style="border: 1px solid black; padding: 2px;"></span> = <span style="border: 1px solid black; padding: 2px;"><b>\$5,178.00</b></span>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. + <b>\$0.00</b>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.		12. <span style="border: 1px solid black; padding: 2px;"><b>\$5,178.00</b></span> <b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b> <input checked="" type="checkbox"/> No. <span style="border: 1px solid black; padding: 5px; display: inline-block; width: 600px; height: 40px; vertical-align: top;">None.</span> <input type="checkbox"/> Yes. Explain:		

**Fill in this information to identify your case:**

Debtor 1	<b>Duane</b>	<b>Elliott</b>	<b>Alexander</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>NORTHERN DISTRICT OF GEORGIA</b>		
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

**Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

**1. Is this a joint case?**

- ☒ No. Go to line 2.
- ☐ Yes. **Does Debtor 2 live in a separate household?**
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

**2. Do you have dependents?**

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☒ No

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**

- ☒ No
- ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

**Your expenses**

**4. The rental or home ownership expenses for your residence.**  
Include first mortgage payments and any rent for the ground or lot.

4. \$1,075.00

**If not included in line 4:**

4a. Real estate taxes

4a. \_\_\_\_\_

4b. Property, homeowner's, or renter's insurance

4b. \_\_\_\_\_

4c. Home maintenance, repair, and upkeep expenses

4c. \$100.00

4d. Homeowner's association or condominium dues

4d. \$58.00

Debtor 1 Duane Elliott Alexander Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Your expenses**

5. **Additional mortgage payments for your residence**, such as home equity loans 5. \_\_\_\_\_
6. **Utilities:**
- 6a. Electricity, heat, natural gas 6a. \$295.00
- 6b. Water, sewer, garbage collection 6b. \$225.00
- 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$125.00
- 6d. Other. Specify: Cell Phone 6d. \$100.00
7. **Food and housekeeping supplies** 7. \$295.00
8. **Childcare and children's education costs** 8. \_\_\_\_\_
9. **Clothing, laundry, and dry cleaning** 9. \$80.00
10. **Personal care products and services** 10. \$65.00
11. **Medical and dental expenses** 11. \$50.00
12. **Transportation.** Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$290.00
13. **Entertainment, clubs, recreation, newspapers, magazines, and books** 13. \_\_\_\_\_
14. **Charitable contributions and religious donations** 14. \_\_\_\_\_
15. **Insurance.**  
 Do not include insurance deducted from your pay or included in lines 4 or 20.
- 15a. Life insurance 15a. \_\_\_\_\_
- 15b. Health insurance 15b. \_\_\_\_\_
- 15c. Vehicle insurance 15c. \$120.00
- 15d. Other insurance. Specify: \_\_\_\_\_ 15d. \_\_\_\_\_
16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20.  
 Specify: \_\_\_\_\_ 16. \_\_\_\_\_
17. **Installment or lease payments:**
- 17a. Car payments for Vehicle 1 17a. \_\_\_\_\_
- 17b. Car payments for Vehicle 2 17b. \_\_\_\_\_
- 17c. Other. Specify: \_\_\_\_\_ 17c. \_\_\_\_\_
- 17d. Other. Specify: \_\_\_\_\_ 17d. \_\_\_\_\_
18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).** 18. \$270.00
- Child Support**
19. **Other payments you make to support others who do not live with you.**  
 Specify: \_\_\_\_\_ 19. \_\_\_\_\_



Debtor 1 Duane Elliott Alexander Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property	20a. _____
20b. Real estate taxes	20b. _____
20c. Property, homeowner's, or renter's insurance	20c. _____
20d. Maintenance, repair, and upkeep expenses	20d. _____
20e. Homeowner's association or condominium dues	20e. _____

21. Other. Specify: Grooming 21. + \$55.00

**22. Calculate your monthly expenses.**

22a. Add lines 4 through 21.	22a. <u>\$3,203.00</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b. _____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. <u>\$3,203.00</u>

**23. Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. <u>\$5,178.00</u>
23b. Copy your monthly expenses from line 22c above.	23b. - <u>\$3,203.00</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. <u>\$1,975.00</u>

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.  
☐ Yes. Explain here:  
None.

**Fill in this information to identify your case:**

Debtor 1	<b>Duane</b>	<b>Elliott</b>	<b>Alexander</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF GEORGIA</b>			
Case number (if known)			

☐ Check if this is an amended filing

**Official Form 106Sum**

**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

**Part 1: Summarize Your Assets**

**Your assets**

Value of what you own

**1. Schedule A/B: Property** (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	<b>\$129,200.00</b>
1b. Copy line 62, Total personal property, from Schedule A/B.....	<b>\$11,225.00</b>
1c. Copy line 63, Total of all property on Schedule A/B.....	<b>\$140,425.00</b>

**Part 2: Summarize Your Liabilities**

**Your liabilities**

Amount you owe

**2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D....	<b>\$198,932.43</b>
--	---------------------

**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	<b>\$2,500.00</b>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	<b>\$48,520.81</b>

**Your total liabilities**

**\$249,953.24**

**Part 3: Summarize Your Income and Expenses**

**4. Schedule I: Your Income** (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	<b>\$5,178.00</b>
---	-------------------

**5. Schedule J: Your Expenses** (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	<b>\$3,203.00</b>
---	-------------------

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

**\$3,035.17**

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

**Total claim**

**From Part 4 on Schedule E/F, copy the following:**

9a. Domestic support obligations. (Copy line 6a.)	<u><b>\$2,500.00</b></u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u><b>\$0.00</b></u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u><b>\$0.00</b></u>
9d. Student loans. (Copy line 6f.)	<u><b>\$43,042.81</b></u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u><b>\$0.00</b></u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<b>+</b> <u><b>\$0.00</b></u>
9g. <b>Total.</b> Add lines 9a through 9f.	<div style="border: 2px solid black; padding: 2px;"><u><b>\$45,542.81</b></u></div>

**Fill in this information to identify your case:**

Debtor 1	<u>Duane</u>	<u>Elliott</u>	<u>Alexander</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF GEORGIA</u>			
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X** /s/ Duane Elliott Alexander  
Duane Elliott Alexander, Debtor 1

Date 03/05/2017  
MM / DD / YYYY

**X** \_\_\_\_\_  
Signature of Debtor 2

Date \_\_\_\_\_  
MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1	<u>Duane</u>	<u>Elliott</u>	<u>Alexander</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF GEORGIA</u>			
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 107

**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before**

1. What is your current marital status?  
☐ Married  
☒ Not married
2. During the last 3 years, have you lived anywhere other than where you live now?  
☒ No  
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.
3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?  
(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  
☒ No  
☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1      **Duane**                  **Elliott**                  **Alexander**                  Case number (if known) \_\_\_\_\_  
First Name                  Middle Name                  Last Name

## Part 2: Explain the Sources of Your Income

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
- ☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
From January 1 of the current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips	<u>\$7,810.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips	<u>                    </u>
	<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	
For the last calendar year:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips	<u>\$11,000.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips	<u>                    </u>
(January 1 to December 31, <u>2016</u> )	<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	
<u>      YYYY      </u>				
For the calendar year before that:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips	<u>\$15,000.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips	<u>                    </u>
(January 1 to December 31, <u>2015</u> )	<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	
<u>      YYYY      </u>				

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No
- ☐ Yes. Fill in the details.

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

- ☐ No. Go to line 7.
- ☐ Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☒ No. Go to line 7.
- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

- ☒ No
- ☐ Yes. List all payments to an insider.

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
- ☐ Yes. List all payments that benefited an insider.

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☒ No
- ☐ Yes. Fill in the details.

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

- ☒ No. Go to line 11.  
☐ Yes. Fill in the information below.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No  
☐ Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No  
☐ Yes

### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No  
☐ Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No  
☐ Yes. Fill in the details for each gift or contribution.

### Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No  
☐ Yes. Fill in the details.

### Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

- ☐ No  
☒ Yes. Fill in the details.

Person Who Was Paid		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<b>Allen Credit &amp; Debt Counseling</b>		<b>\$25 by Berry &amp; Associates on behalf of debtor</b>		
Number	Street		<u>3/2/17</u>	<u>\$25.00</u>
City	State	ZIP Code		
Email or website address				
Person Who Made the Payment, if Not You				



Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No  
☐ Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- ☒ No  
☐ Yes. Fill in the details.

#### Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No  
☐ Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No  
☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No  
☐ Yes. Fill in the details.

#### Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No  
☐ Yes. Fill in the details.

Debtor 1 Duane Elliott Alexander Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

## Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No  
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

## Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.  
☐ Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☐ No  
☐ Yes. Fill in the details below.

Debtor 1 Duane Elliott Alexander Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Duane Elliott Alexander X \_\_\_\_\_  
Duane Elliott Alexander, Debtor 1 Signature of Debtor 2  
Date 03/05/2017 Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No  
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No  
☐ Yes. Name of person \_\_\_\_\_ Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF GEORGIA  
ATLANTA DIVISION**

In re **Duane Elliott Alexander**

Case No. \_\_\_\_\_

Chapter **13** \_\_\_\_\_

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<u><b>\$4,000.00</b></u>
Prior to the filing of this statement I have received.....	<u><b>\$0.00</b></u>
Balance Due.....	<u><b>\$4,000.00</b></u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;

b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

d. [Other provisions as needed]

**Stop creditor actions against client**

**Pre confirmation Motion to Extend of Impose Stay**

**Response to Pre-Confirmation Motion for Relief from Stay**

**Employer Deduction Order**

**Lien Avoidances necessary to confirm Plan**

**Modification necessary to confirm Plan**

**Objections to claims necessary to confirm Plan**

**Objections to late-filed claims**

**Bar Date review of claims, filing of certification and resulting pleadings**

**Change of Address**

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**Motion to Retain (\$450)**  
**Amend or Modify schedules (\$300)**  
**Plan Modification (\$300)**  
**Lien Avoidance (\$300)**  
**Objection to Claim (\$350)**  
**Resolving Motion for Relief from Stay (\$450)**  
**Motion to Suspend of Excuse Plan Payments (\$350)**  
**Motion to Sell Property (\$500)**  
**Motion to Compromise Claim (\$500)**  
**Application to Employ Professional (\$400)**  
**Motion to Refinance Property or Motion to Incur (\$500)**  
**Resolving Motions to Dismiss (\$350)**  
**Resolving Creditor or Trustee Motions to Modify Plan (\$150)**  
**Motion to Sever or Dismiss as to one joint Debtor (\$300)**  
**Motion to Reopen or to Vacate Dismissal Order (\$500)**  
**Motion to Reimpose Stay (\$500)**  
**Adversary Proceeding (\$375/hour)**  
**Miscellaneous Action (\$400)**

7. If this is a Chapter 13 proceeding, I certify that I have provided the debtor with the statement entitled "Rights and Responsibilities".

8. In addition to the overall fee structure, in the event that the case is dismissed or converted to a chapter 7 proceeding the chapter 13 trustee shall deliver to Debtor's Counsel the unpaid amount of the agreed upon fees up to:

- (i) \$2,000.00 upon a pre-confirmation conversion or dismissal;
- (ii) the allowed fees upon a post-confirmation conversion or dismissal

9. In addition to the attorney fees agreed upon above, Berry & Associates seeks an additional \$388.00 advanced to the Debtor for filing, credit report and counseling, and tax transcript fees.

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Pursuant to General Order No. 9, I certify that I provided to the Debtor a copy of the "Rights and Responsibilities Statement Between Chapter 13 Debtors and Their Attorneys".

**03/05/2017**

*Date*

**/s/ Matthew T. Berry**

*Matthew T. Berry*  
Berry & Associates  
2751 Buford Hwy  
Suite 600  
Atlanta, GA 30324  
Phone: (404) 235-3300 / Fax: (404) 235-3333

Bar No. 055663

Aaron Sales & Lease Ow  
xxxxx6785  
309 E Paces Ferry  
Atlanta, GA 30303

ADT Security Systems Inc.  
Attn: False Alarm/CRD  
10550 Deerwood Park Blvd. Bldg 400  
Jacksonville, FL 32256

Alcovy Falls Community Association, Inc  
Georgia Community Management Inc.  
PO Box 2750  
Loganville GA 30052

Alcovy Falls Homeowner's Association  
Georgia Community Management  
PO Box 2750  
Loganville, Georgia 30052

Aldridge Connors, LTD  
15 Piedmont Center  
3575 Piedmont Road, NE Ste 500  
Atlanta, GA 30305

Amca/American Medical Coll Agency  
xxxxxxxxxxxxxQQQQ  
4 West Chester Plaza  
Elmsford, NY 10523

Aspire  
xxxxxxxxxxxxx9938  
Po Box 105555  
Atlanta, GA 30348

Asset Acceptance  
xxxxxx7358  
Attn: Bankrupcy Dept  
PO Box 2036  
Warren, MI 48090

Asset Acceptance  
xxxxxx3542  
Attn: Bankrupcy Dept  
PO Box 2036  
Warren, MI 48090

Asset Acceptance Llc  
xxxxxx7358  
Pob 1630  
Warren, MI 48090

Back Bowl I, LLC  
c/o Weinstein & Riley, PS  
Po Box 3978  
Seattle, WA 98124

Calvary Portfolio Services  
xxxx9351  
Attention: Bankruptcy Department  
500 Summit Lake Dr. Suite 400  
Valhalla, NY 10595

Capital 1 Bank  
xxxxxxxxxxxxxx9647  
Attn: General Correspondence  
PO Box 30285  
Salt Lake City, UT 84130

Capital One  
xxxxxxxxxxxxxx6764  
Attn: General Correspondence/Bankruptcy  
PO Box 30285  
Salt Lake City, UT 84130

Capital One Auto Finance  
xxxxxxxxxxxxxx1001  
3905 N Dallas Pkwy  
Plano, TX 75093

Capital One, N.a.  
xxxxxxxxxxxxxx9647  
Capital One Bank (USA) N.A.  
PO Box 30285  
Salt Lake City, UT 84130

Cavalry Portfolio Service, LLC  
500 Summit Lake Drive  
Ste 400  
Valhalla, NY 10595

Chase  
xxxxxxxxxxxxxx7683  
P.o. Box 15298  
Wilmington, DE 19850

Chase  
xxxxxxxxxxxxxx7418  
P.o. Box 15298  
Wilmington, DE 19850

Chase Bank USA, NA  
7322 SW Freeway, Ste 1600  
Houston, TX 77074-2053

Chela/Sallie Mae  
xxxxxxxxxxxxxxxxxxxx0801  
Attn: Claims Department  
PO Box 9500  
Wilkes-Barre, PA 18773

Child Support Enforcement/DCSS  
Gwinnett County Branch  
1000 Hurricane Shoals Road, NE Bldg A-10  
Lawrenceville, GA 30043-4826

Choice One Dental Care  
1930 Buford Mill Drive  
Suite F  
Buford, GA 30519

Citibank Sd, Na  
xxxxxxxxxxxxxx6705  
Attn: Centralized Bankruptcy  
PO Box 20507  
Kansas City, MO 64195

Citibank Usa  
xxxxxxxxxxxxxx6289  
CITICORP CREDIT SERVICES/ATTN: CENTRALIZ  
PO Box 20363  
Kansas City, MO 64195

Citibank Usa  
xxxxxxxxxxxxxx6289  
Citicorp Credit Services/Attn:Centralize  
PO Box 20507  
Kansas City, MO 64195

Citibank/The Home Depot  
xxxxxxxxxxxxxx6289  
Citicorp Cr Srvs/Centralized Bankruptcy  
PO Box 790040  
S Louis, MO 63129



Citifinancial  
xxxxxxxxxxxxx6417  
PO Box 499  
Hanover, MD 21076-0499

Citifinancial  
xxxxxxxxxxxxx0665  
300 Saint Paul Pl  
Baltimore, MD 21202

Citifinancial  
xxxxxxxxxxxxx6417  
300 Saint Paul Pl  
Baltimore, MD 21202

Citifinancial  
xxxxxxxxxxxxx0665  
605 Munn Road  
Fort Mill, SC 29715

Convergent Outsourcing  
PO Box 9007  
Renton, WA 98057

Credit One Bank  
xxxxxxxxxxxxx1627  
PO Box 98873  
Las Vegas, NV 89193

Dept Stores National Bank/Macys  
c/o NCO Financial Systems, Inc  
Po Box 4275  
Norcross, GA 30091

Dsnb Macys  
xxxxxxxxxx2020  
9111 Duke Blvd  
Mason, OH 45040

Dsnb Macys  
xxxxxxxxxx2020  
Po Box 8218  
Mason, OH 45040

Ecmc  
xxxxxxx0003  
PO Box 64909  
St. Paul, MN 55164

ECMC  
Lockbox #8682  
Po Box 16478  
St. Paul, MN 55116

Ecmc  
xxxxxxx0003  
Capital One Retail Srvs/Attn: Bankruptcy  
PO Box 30258  
Salt Lake City, UT 84130

Ecmc  
xxxxxxx0002  
Capital One Retail Srvs/Attn: Bankruptcy  
PO Box 30258  
Salt Lake City, UT 84130

Ecmc  
xxxxxxx0004  
Capital One Retail Srvs/Attn: Bankruptcy  
PO Box 30258  
Salt Lake City, UT 84130

Ecmc  
xxxxxxx0001  
Capital One Retail Srvs/Attn: Bankruptcy  
PO Box 30258  
Salt Lake City, UT 84130

Enhanced Recovery Corp  
xxxx8805  
Attention: Client Services  
8014 Bayberry Rd  
Jacksonville, FL 32256

Fac/nab  
xxx3193  
Attn: ABK Unit  
PO Box 198988  
Nashville, TN 37219

Family Practice Clinic P.C.  
696 Grayson Hwy  
Lawrenceville, Georgia 30046

First Premier  
3820 N. Louise Ave.  
Sioux Falls, SD 57107-0415

First Premier Bank  
xxxxxxxxxxxxx1131  
3820 N Louise Ave  
Sioux Falls, SD 57107

First Premier Bank  
xxxxxxxxxxxxx6689  
601 S Minnesota Ave  
Sioux Falls, SD 57104

Fst Premier  
xxxxxxxxxxxxx5954  
601 S Minneapolis Ave  
Sioux Falls, SD 57104

Gemb/walmart  
xxxxxxxxxxxxx5433  
Attn: Bankruptcy  
PO Box 103104  
Roswell, GA 30076

Georgia Department of Revenue  
1800 Century Blvd NE, Suite 17200  
Bankruptcy Unit  
Atlanta, GA 30345

Georgia Department of Revenue  
Bankruptcy Unit  
1800 Century Blvd, NE, Ste 9100  
Atlanta, GA 30345

Gwinnett County Tax Commissioner  
PO Box 372  
Lawrenceville, GA 30046

Gwinnett Hospital System  
Po Box 116228  
Atlanta, GA 30368-6228

Gwinnett Medical Center  
PO Box 116228  
Atlanta, GA 30368

Gwinnett Surgical Associates  
600 Professional Drive, Ste 250  
Lawrenceville, GA 30045

HSBC Auto Finance / Santander  
xxxxxxxxxx0234  
Santander Consumer USA  
PO Box 961245  
Fort Worth, TX 76161

Hsbc Bank  
xxxxxxxxxxxxx9686  
Po Box 5253  
Carol Stream, IL 60197

Hsbc Bank  
xxxxxxxxxxxxx3982  
Po Box 5253  
Carol Stream, IL 60197

IC System  
xxxxxxx2001  
Attn: Bankruptcy  
444 Highway 96 East; PO Box 64378  
St. Paul, MN 55164

Ic Systems Inc  
xxxxxxx2001  
PO Box 64378  
St. Paul, MN 55164

IC Systems, Inc  
xxxxxxx2001  
444 Highway 96 East  
St Paul, MN 55127

Insolve Recovery, LLC  
c/o Capital Recovery Group, LLC  
Po Box 123203  
Dallas, TX 75312

Internal Revenue Service  
PO Box 7317  
Philadelphia, PA 19101-7317

Jefferson Capital  
xxxxxxxxxx3003  
16 McLeland Rd  
Saint Cloud, MN 56303

Jefferson Capital  
xxxxxxxxxx5003  
16 McLeland Rd  
Saint Cloud, MN 56303

Jefferson Capital Systems, LLC  
Po Box 953185  
St. Louis, MO 63195

Kroger Check Recovery Center  
PO Box 30650  
Salt Lake City, UT 84130-0650

Lab Corp of America Holdings  
PO Box 2240  
Burlington, NC 27216-2240

Larina Weatherby  
c/o Gwinnett County DFACS  
446 W. Crogan St  
Lawrenceville GA 30046

Larina Weathersby  
1303 Glenleaf Drive  
Norcross, GA 30092

Lvnv Funding Llc  
xxxxxxxxxxxxx1627  
Po Box 740281  
Houston, TX 77274

Mabt/contfin  
xxxxxxxxxxxxx5621  
121 Continental Dr Ste 1  
Newark, DE 19713

Med Data Sys  
xxxxxxx8463  
2001 19th Ave Suite 312  
Vero Beach, FL 32960

Mid Am B&T Credit Card  
xxxxxxxxxxxxx6053  
PO Box 68  
Ralla, MO 65402

Optimum Outcomes, Inc  
xxxxxx3730  
2651 Warrenville Rd Ste 500  
Suite 400  
Downers Grove, IL 60515

Pawn Mart  
7471 HWY 85 STE C and D  
Riverdale, GA 30274

Portfolio Recovery Associates, LLC  
Po Box 12914  
Norfolk, VA 23541

Sallie Mae  
xxxxxxxxxxxxxxxxxxxxx0810  
Attn: Navient  
PO Box 9500  
Wilkes-Barr, PA 18873

Santander  
xxxxxxxxxxxxx1000  
Po Box 961245  
Fort Worth, TX 76161

Santander Consumer Usa  
xxxxxxxxxxxxx1000  
Po Box 961245  
Ft Worth, TX 76161

SDCCBS 01  
PO Box 1022  
Wixom, MI 48393-1022

Sherwin P. Robin  
PO Box 9541  
Savannah, GA 31412-9541

Slm Financial Corp  
xxxxxxxxxxxxxxxxxxxx0730  
Po Box 9500  
Wilkes Barre, PA 18773

Synchrony Bank/Walmart  
xxxxxxxxxxxx5433  
Attn: Bankruptcy  
PO Box 956060  
Orlando, FL 32896

The Cash Line  
2 Pennsway  
Ste #40  
New Castle, DE 19720

US Auto Sales  
2875 University Pkwy  
Lawrenceville, GA 30043

US Dept of Hud  
c/o Deval, LLC  
1255 Corporate Drive, #300  
Irving, TX 75038

Verve  
PO Box 31292  
Tampa, FL 33631-3292

Visa Dept Store National Bank/Macy's  
xxxxxxx3120  
Attn: Bankruptcy  
PO Box 8053  
Mason, OH 45040

Wells Fargo  
PO Box 98751  
Las Vegas, NV 89193-8751

Wells Fargo Bank, NA  
One Home Campus  
MAC #X2302-04C  
Des Moines, IA 50328

Wells Fargo Hm Mortgag  
xxxxxxxxxx4382  
8480 Stagecoach Cir  
Frederick, MD 21701

Wells Fargo Home Mortgage  
Po Box 10368  
Des Moines, IA 50306-0368

White Hills Cash  
5781 W. Sunrise Blvd.  
Plantation FL 33313

Zale/Sterling Jewelers  
xxxxxxxxxxxxxx6978  
Attn.: Bankruptcy  
PO Box 1799  
Akron, OH 43309



Fill in this information to identify your case:				Check as directed in lines 17 and 21:	
Debtor 1	<b>Duane</b>	<b>Elliott</b>	<b>Alexander</b>	According to the calculations required by this Statement:	
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)				<input checked="" type="checkbox"/> 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).  <input type="checkbox"/> 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).  <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <input checked="" type="checkbox"/> 3. The commitment period is 3 years.  <input type="checkbox"/> 4. The commitment period is 5 years.	
United States Bankruptcy Court for the: <b><u>NORTHERN DISTRICT OF GEORGIA</u></b>					
Case number (if known)					

Official Form 122C-1

## Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

**Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).**

## Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status?** Check one only.

- ☒ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married.** Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. <b>Your gross wages, salary, tips, bonuses, overtime, and commissions</b> (before all payroll deductions).	<b>\$3,035.17</b>	
3. <b>Alimony and maintenance payments.</b> Do not include payments from a spouse.	<b>\$0.00</b>	
4. <b>All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.</b> Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	<b>\$0.00</b>	
5. <b>Net income from operating a business, profession, or farm</b>		
	<b>Debtor 1</b>	<b>Debtor 2</b>
Gross receipts (before all deductions)	<b>\$0.00</b>	
Ordinary and necessary operating expenses	<b>\$0.00</b>	
Net monthly income from a business, profession, or farm	<b>\$0.00</b>	
	<b>Copy here →</b>	<b>\$0.00</b>

Debtor 1 **Duane** **Elliott** **Alexander** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

Column A  
Debtor 1

Column B  
Debtor 2 or  
non-filing spouse

**6. Net income from rental and other real property**

	Debtor 1	Debtor 2		
Gross receipts (before all deductions)	<u>\$0.00</u>	_____		
Ordinary and necessary operating expenses	<u>\$0.00</u>	_____		
Net monthly income from rental or other real property	<u>\$0.00</u>	_____	Copy here →	<u>\$0.00</u>

**7. Interest, dividends, and royalties**

\$0.00 \_\_\_\_\_

**8. Unemployment compensation**

\$0.00 \_\_\_\_\_

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \_\_\_\_\_↓

For you..... \$0.00

For your spouse..... \_\_\_\_\_

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.

\$0.00 \_\_\_\_\_

**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

\_\_\_\_\_  
 \_\_\_\_\_

Total amounts from separate pages, if any.

+ \_\_\_\_\_ + \_\_\_\_\_

**11. Calculate your total average monthly income.**

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

\$3,035.17 +          = \$3,035.17

Total average  
monthly income

**Part 2: Determine How to Measure Your Deductions from Income**

**12. Copy your total average monthly income from line 11.** ..... \$3,035.17

**13. Calculate the marital adjustment.** Check one:

- ☒ You are not married. Fill in 0 below.  
☐ You are married and your spouse is filing with you. Fill in 0 below.  
☐ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Total..... \$0.00 Copy here → \$0.00

**14. Your current monthly income.** Subtract the total in line 13 from line 12.

\$3,035.17

Debtor 1 **Duane Elliott Alexander** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**15. Calculate your current monthly income for the year.** Follow these steps:

15a. Copy line 14 here → ..... **\$3,035.17**  
Multiply line 15a by 12 (the number of months in a year). **X 12**  
15b. The result is your current monthly income for the year for this part of the form. .... **\$36,422.04**

**16. Calculate the median family income that applies to you.** Follow these steps:

16a. Fill in the state in which you live. Georgia  
16b. Fill in the number of people in your household. 1  
16c. Fill in the median family income for your state and size of household..... **\$42,735.00**  
To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**17. How do the lines compare?**

- 17a. ☒ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3.* Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2).  
17b. ☐ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).*  
On line 39 of that form, copy your current monthly income from line 14 above.

**Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)**

18. Copy your total average monthly income from line 11. .... **\$3,035.17**  
19. **Deduct the marital adjustment if it applies.** If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  
19a. If the marital adjustment does not apply, fill in 0 on line 19a. .... **\$0.00**  
19b. Subtract line 19a from line 18. .... **\$3,035.17**

**20. Calculate your current monthly income for the year.** Follow these steps:

20a. Copy line 19b ..... **\$3,035.17**  
Multiply by 12 (the number of months in a year). **X 12**  
20b. The result is your current monthly income for the year for this part of the form. .... **\$36,422.04**  
20c. Copy the median family income for your state and size of household from line 16c. .... **\$42,735.00**

**21. How do the lines compare?**

- ☒ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years.* Go to Part 4.  
☐ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years.* Go to Part 4.

**Part 4: Sign Below**

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

**X /s/ Duane Elliott Alexander**  
Duane Elliott Alexander, Debtor 1

**X** \_\_\_\_\_  
Signature of Debtor 2

Date 3/5/2017  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Debtor 1     **Duane**                      **Elliott**                      **Alexander**                      Case number (if known) \_\_\_\_\_  
First Name                      Middle Name                      Last Name